

(DIALYSIS FACILITY NAME)
Quality Assessment and Performance Improvement (QAPI)
Minutes of the Meeting
(DATE HERE)

PRESENT: Medical Director
Administrator
Clinical Care Coordinator, RN
Renal Dietitian
Social Worker
Guest, Nursing
Guest, Technician

CALL TO ORDER:

Committee Recommendations from (DATE HERE)

The QAPI committee reviewed the following recommendations made by the committee on (DATE HERE):

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Statistics

YEAR: 2009	J	F	M	A	M	J	J	A	S	O	N	D
Patients:												
• Beginning Totals												
• Beginning Month Total HD Pt.												
• Beginning Month CAPD Pt.												
• Beginning Month CCPD Pt.												
Additions (+):												
• Transfer In												
• Returned from Transplant												
• Transient Patients												
• Restart												
• New Starts												
• Acute												
Losses (-):												
• Expired												
• Standardized Mortality Rate												
• Sign Off												
• Recovered Function												
• Transfer Out												
• Transfer Out/Transplant												
End Total Patients:												
Treatments:												
• Hemodialysis Tx - Extra												
• Hemodialysis Tx – Routine												
• Hemodialysis Transient												
End Total Hemodialysis												
• CAPD Training Treatments												
• CCPD Training Treatments												
End Total Peritoneal Training												
End Total Treatments												

The committee reviewed the patient activity statistics, which included the census with regard to additions, losses and treatments provided for the month of (DATE HERE) as compared to (DATE HERE). The committee recognized only ___ addition was a transfer in and ___o loses during the month of ___. The total treatments provided by the facility for (DATE HERE) (Describe).

2009	J	F	M	A	M	J	J	A	S	O	N	D
HEMODIALYSIS ADEQUACY												
% of Pts KT/V \geq 1.2 Goal: \geq 95%												
% of Pts URR \geq 65% Goal: \geq 95%												
PERITONEAL DIALYSIS ADEQUACY												
% CAPD Pts w/Creatinine Clearance \geq 60 L/Wk or Wkly KT/V \geq 2.0 Goal: $>$ 85%												
% CCPD Pts w/Creatinine Clearance \geq 63 L/Wk or Wkly KT/V \geq 2.1 Goal: $>$ 85%												
ANEMIA MANAGEMENT												
% Pts T-Sat \geq 20% $>$ 20% (10/08) Goal: \uparrow %												
% Pts Ferritin \geq 200 $>$ 200 (10/08) Goal: \uparrow %												
% Pts Hgb \geq 11 10-12 (4/08) Goal: \uparrow %												
% Pts Hct 30-36% (10/08) Goal: \uparrow %												
VASCULAR ACCESS MANAGEMENT												
% AVF Goal: \uparrow \geq 66%												
% AVG												
% Catheters $>$ 90 days Goal: \downarrow $<$ 10%												
% Catheters $<$ 90 days												
NUTRITION												
% of Pts Albumin \geq 3.5 \geq 4.0 (10/08)												
RENAL BONE DISEASE												
% of Pts IPTH \leq 300 150-300 (10/08) Goal: \uparrow %												
% of Pts CA/PO Product $<$ 55 Goal: \uparrow %												
% of Pts Cal $>$ 8.4 - $<$ 10.2 Goal: \uparrow %												
% of Pts Phos 3.5 - 5.5 Goal: \uparrow %												
VACCINATIONS												
% of Pts Hep B Vaccination Goal: \uparrow %												
% of Pts Pneumonia Vaccine Goal: \uparrow %												
% of Pts Influenza Vaccine 10/1-3/31 Goal: \uparrow %												
INFECTIONS												
Infections-Fistula \downarrow $<$ 1% Grafts \downarrow $<$ 10%												
Thrombosis Episodes-Fistula \downarrow $<$ 0.50/pt/yr Grafts \downarrow $<$ 0.25/pt/yr												
VA Patency-Fistula \uparrow $>$ 3 yrs Goal: \uparrow % Grafts \uparrow $>$ 2 yrs Goal: \uparrow %												
PHYSICAL/MENTAL FUNCTIONING												
# Patients/% Completing KDQOL-36 Goal: \uparrow %/total Monthly												
Total												

Quality Indicators

The committee reviewed all quality indicators incorporated in the plan. Findings were as follows:

Hemodialysis Adequacy

(SUMMARIZE FINDINGS)

- o Plan – (DESCRIBE PLAN).

Peritoneal Dialysis Adequacy

(SUMMARIZE FINDINGS)

Anemia Management

(SUMMARIZE FINDINGS)

- o Plan- (DESCRIBE PLAN)

Vascular Access Management

(SUMMARIZE FINDINGS)

- o Plan- (DESCRIBE PLAN)

Nutrition

(SUMMARIZE FINDINGS)

- o Plan – (DESCRIBE PLAN)

Bone Disease

(SUMMARIZE FINDINGS)

- o **Plan** – (DESCRIBE PLAN)

Vaccinations

(SUMMARIZE FINDINGS)

- o **Plan** – (DESCRIBE PLAN)

Physical/Mental Functioning

(SUMMARIZE FINDINGS)

- o **Plan** – (DESCRIBE PLAN)

Infection Control

(SUMMARIZE FINDINGS)

- o **Plan** – (DESCRIBE PLAN)

Medical Injuries/Medical Errors

(SUMMARIZE FINDINGS)

- o **Plan** –

Water Treatment

(SUMMARIZE FINDINGS)

- o **Plan** – (DESCRIBE PLAN)

Management of Information

(SUMMARIZE FINDINGS)

- o **Plan** – (DESCRIBE PLAN)

Miscellaneous Issues

(SUMMARIZE FINDINGS)

- o **Plan** – (DESCRIBE PLAN)

Committee Recommendations for 6/30/2009-

The committee made the following recommendations.

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Adjournment

There being no further issues or concerns, the meeting adjourned at (TIME HERE).

This Template Courtesy of Danville Dialysis Services in Danville, IL.